

2000 UNIFORM BUSINESS REPORT (UBR)

8/

FILED
Sep 07, 2000 8:00 am
Secretary of State

08-02-2000 90150 017 ****61.25
 09-07-2000 90058 035 ****88.75

DOCUMENT # P94000016998

1. Entity Name

HARBOUR OAKS INVESTMENTS CORPORATION

Principal Place of Business

744 HIGHLAND AVE.
 ORLANDO FL 32803

Mailing Address

744 HIGHLAND AVE.
 ORLANDO FL 32803

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3232263

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KELLER, CHARLES W
 744 HIGHLAND AVE.
 ORLANDO FL 32803**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
 After SEPTEMBER 13, 2000 Min. will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PS
 KELLER, CHARLES W
 744 HIGHLAND AVE.
 ORLANDO FL 32802** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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 CITY-ST-ZIP ☐ Delete

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles W. Keller
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Charles W. Keller

7/27/00 (407) 30-4767
 Date Daytime Phone #

CR2E034 (5/00)

Florida Department of State

P.O. Box 1500

Tallahassee, Florida 32302-1500

Re: Harbor Oaks Investments Corp

Dear Sir:

Please waive the \$400.00 late fee. I don't believe that I received the annual Report earlier this year. However I have been sick this spring and may have received it. Your assistance would be greatly appreciated.

Sincerely,

Charles Keller

(407) 330-4767